24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule F)

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Stop Hillary PAC	C C00544767
	M M / D D / Y Y Y Y
Check if 24-hour report X 48-hour report New report Amends report filed	
Full Name of Payee AMERICAN ACTION NEWS, LLC	Date of Public Distribution/Dissemination
	12 01 2015
Mailing Address 203 S. UNION ST, STE 300	Amount
City State Zip Code	2500.00
ALEXANDRIA VA 22314	Transaction ID : SE24.11736 Date of Disbursement or Obligation
Purpose of Expenditure ESTIMATE OF DECEMBER MONTHLY ONLINE ADVERTISING FEES Category/ Type	12 / 01 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Office	Sought: House District:
HILLARY CLINTON Oppose	President Senate State:
Calendar Year-To-Date Per Election for Office Sought Disbut 2016	rsement For: Primary
Full Name of Payee	Date of Public Distribution/Dissemination
CAMPAIGN SOLUTIONS	12 01 2015
Mailing Address 117 N. SAINT ASAPH ST	Amount
City State Zip Code	10000.00
ALEXANDRIA VA 22314	Transaction ID : SE24.11732 Date of Disbursement or Obligation
Purpose of Expenditure ESTIMATE OF DECEMBER MONTHLY LIST RENTAL FEES Category/ Type	12 01 2015
Name of Federal Candidate Support Office	Sought: House District:
HILLARY CLINTON Oppose	President Senate State:
Calendar Year-To-Date Per Election for Office Sought Disbut 2016	orsement For: Primary
(a) SUBTOTAL of Itemized Independent Expenditures	12500.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not may with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	·
Dan Backer [Electronically Filed] Date 1	2 02 2015
Signature	

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Stop Hillary PAC	C C00544767
	0
Check if 24-hour report X 48-hour report New report Amends report filed	on M M / D D / Y Y Y Y Y
Full Name of Payee CAMPAIGN SOLUTIONS	Date of Public Distribution/Dissemination
	12 01 2015
Mailing Address 117 N. SAINT ASAPH ST	Amount
City State Zip Code	10000.00
ALEXANDRIA VA 22314	Transaction ID : SE24.11733 Date of Disbursement or Obligation
Purpose of Expenditure ESTIMATE OF DECEMBER MONTHLY EXTERNAL DEPLOYMENT COSTS Category/ Type	12 01 2015
Name of Federal Candidate Support Office	e Sought: House District:
HILLARY CLINTON Oppose	President Senate State:
Calendar Year-To-Date Per Election for Office Sought Disbut 2016	orsement For: Primary
Full Name of Payee	Date of Public Distribution/Dissemination
CAMPAIGN SOLUTIONS	12 01 2015
Mailing Address 117 N. SAINT ASAPH ST	Amount
City State Zip Code	10000.00
ALEXANDRIA VA 22314	Transaction ID : SE24.11734 Date of Disbursement or Obligation
Purpose of Expenditure ESTIMATE OF DECEMBER MONTHLY FACEBOOK ADVERTISING Category/ Type	12 01 / 2015
Name of Federal Candidate Support Office	e Sought: House District:
HILLARY CLINTON Oppose	President Senate State:
Calendar Year-To-Date Per Election for Office Sought Disbut	ursement For: Primary X General Other (specify) ▶
	Other (specify) P
(a) SUBTOTAL of Itemized Independent Expenditures	20000.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not may with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	•
24.0	2 02 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 3 OF 3 FOR SE OF FORM 24/48	
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼	
Stop Hillary PAC	C C00544767	
Check if 24-hour report X 48-hour report New report Amends report filed of	on M = M / D = D / Y = Y = Y	
Full Name of Payee	Date of Public Distribution/Dissemination	
CD, INC.	12 01 2015	
Mailing Address P.O. BOX 1877	Amount	
City State Zip Code	10000.00	
	Transaction ID : SE24.11735 Date of Disbursement or Obligation	
Purpose of Expenditure ESTIMATE OF DECEMBER MONTHLY LIST RENTAL FEES AND ONLINE ADVERTISING Category/ Type	12 / 01 / 2015	
Name of Federal Candidate Support Office	Sought: House District:	
	President Senate State:	
Calendar Year-To-Date Per Election for Office Sought Disburs 2016	sement For:	
Full Name of Payee	Date of Public Distribution/Dissemination	
POLITICAL LIST BROKERS, LLC	12 01 2015	
Mailing Address 107 S. WEST ST	Amount	
PMB 826		
City State Zip Code	10000.00	
	Transaction ID: SE24.11737 Date of Disbursement or Obligation	
ESTIMATE OF DECEMBER MONTHLY LIST RENTAL FEES Category/ Type	12 / 01 / 2015	
Name of Federal Candidate Support Office	Sought: House District:	
	President Senate State:	
Calendar Year-To-Date Per Election for Office Sought Disbur: 2016	rsement For: Primary General Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures	20000.00	
(b) SUBTOTAL of Unitemized Independent Expenditures	1 7 1 7 1 7	
(c) TOTAL Independent Expenditures	52500.00	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.		
Dan Backer [Electronically Filed] Date 12	02 2015	
Signature		